PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail

Mail Stop ISSUE FEE Commissioner for Patents P.O. Box 1450
Alexandria, Virginia 22313 Virginia 22212 1450

| | or Fax (703) 746-4000 | | | | | |
|--|---|--|--|--|--|---|
| INSTRUCTIONS: This for appropriate. All further co indicated unless corrected maintenance fee notificatio | orm should be used for tran rrespondence including the below or directed otherwise ns. | smitting the ISSU Patent, advance ord in Block I, by (a) | E FEE and PUBLIC ders and notification specifying a new c | OATION FEE (if required of maintenance fees worrespondence address; | ired). Blocks 1 through 5 s will be mailed to the current and/or (b) indicating a sep- | should be completed where correspondence address as arate "FEE ADDRESS" for |
| CURRENT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of address 10/27/2004 | | | PER | Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission. | | |
| BROWNING BUSHMAN P.C. Suite 1800 5718 Westheimer Houston, TX 77057 | | NON 0 8 5007 | | Certificate of Mailing or Transmission I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USETO (703) 7.46-4000, on the date indicated below. | | |
| 1/09/2004 ZJUHAR2 00000033 10051428 | | Fire CMARK | | Sheri | Capper | (Depositor's name) |
| | | THATE TRADENT | | Hed over | | (Signature) |
| 1 FC:1501 2 FC:1504 | FC:1504 300.00 OP | | | | ber 3, 2004 | (Date) |
| 3 FC: 8001 APPLICATION NO. | FILING DATE OF | FIRST NAMED INV | | NTOR | ATTORNEY DOCKET NO. | CONFIRMATION NO. |
| 10/051,428 | 01/18/2002 | | Gregory K. Otte | n | GRANT PRIDECO-124-1 | 1008 |
| TITLE OF INVENTION: F | REPLACEABLE CORROSIO | ON SEAL FOR TH | READED CONNEC | TIONS | | |
| APPLN. TYPE | SMALL ENTITY | ISSUE FE | EE P | UBLICATION FEE | TOTAL FEE(S) DUE | DATE DUE |
| nonprovisional | NO | \$1370 | · | \$300 | \$1670 - | 01/27/2005 |
| EXAMINER | | ART UNIT | | LASS-SUBCLASS | | |
| HEWITT, JAMES M | | 3679 | | 285-334000 | | |
| 1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Custome Number is required. | | | 2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed. C. James Bushman Browning Bushman P.C. 2 3 | | | |
| 3. ASSIGNEE NAME ANI | D RESIDENCE DATA TO E | SE PRINTED ON T | HE PATENT (print | or type) | | |
| PLEASE NOTE: Unles recordation as set forth i | s an assignee is identified b n 37 CFR 3.11. Completion | elow, no assignee of this form is NOT | data will appear on Γa substitute for filir | the patent. If an assign ng an assignment. | nee is identified below, the | document has been filed for |
| (A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY) | | | | | | |
| Grant Prideco, L.P. 400 N. Sam Houston Parkway East, Suite 900 Houston, Texas 77060 | | | | | | 900 |
| Please check the appropriat | e assignee category or catego | ories (will not be pri | inted on the patent): | Individual C | orporation or other private gr | roup entity Government |
| Please check the appropriate assignee category or categories (will not be printed on the patent): Individual Corporation or other private group entity Government 4a. The following fee(s) are enclosed: 4b. Payment of Fee(s): A check in the amount of the fee(s) is enclosed. | | | | | | |
| ☐ Publication Fee (No small entity discount permitted) ☐ Payment by credit card. Form PTO-2038 is attached. | | | | | | |
| Advance Order - # c | | | The Director is Deposit Account No | hereby authorized by o imber <u>02-4345</u> | charge the required fee(s), or (enclose an extra | credit any overpayment, to copy of this form). |
| | s (from status indicated abov SMALL ENTITY status. See | • | ☐ h Applicant is n | o longer claiming SMA | LL ENTITY status. See 37 (| CFR 1.27(g)(2). |
| The Director of the USPTO NOTE: The Issue Fee and | | ue Fee and Publicat | tion Fee (if any) or to | | | ration identified above. the assignee or other party in |
| Authorized Signature | | | Date November 3, 2004 | | | |
| Typed or printed name | C. Dames Bushma | an | | Registration | 1 No. 24,810 | |
| This collection of informati | ion is required by 37 CFR 1 | III The informatio | n is required to obtain | n or retain a henefit hy | the public which is to file (ar | nd by the USPTO to process) |

Inis collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.